FILING DATE **CLAIMS ONLY** CLAIMS AFTER AFTER 2nd AMENDMENT AS FILED IND. IND. DEP. DEP. IND. DEP. DEP. IND, DEP. 种气 2 : 3 4 5 6 7 8 9 54 55 56 57 58 59 60 62 22 3 23 24 3 25 26 27 28 29 30 31 32 35 36 37 38 89 9 9 9 9 9 9 9 97 98 99 100 **—**I TOTAL _1 TOTAL DEP. TOTAL CLAIMS

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

SERIAL NO. 1077, 392 APPLICANT(S) FILING DATE MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875) **CLAIMS** AFTER 2nd AMENDMENT AFTER 1st AMENDMENT AS FILED IND. DEP. IND. DEP. IND. DEP. IND. DEP. IND. DEP. IND. DEP. 101 51 | 52 1 53 104 1 54 1 55 106 **J** 56 107 157 108 (58 109 1 59 110 1 60 111 1 61 112 62 113 63 14 64 115 1 65 116 1 66 1 17 67 1 18 68 19 1 69 20 1 70 21 1 71 $\sqrt{22}$ 172 23 [73 24 174 125 175 126 176 127 1 77 28 1 78 129 179 130 80 31 1 81 (32 82 __1 83 133 134 84 135 85 136 86 137 87 38 [88] <u> 1</u>39 89 140 (90 41 191 (42 (92 43 193 194 144 145 195 46 96 147 197 **į**48 į 98 149 199 150 **1**00 TOTAL TOTAL

TOTAL DEP.

TOTAL DEP.